CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION

INSTRUCTIONS: Complete items 1 - 10 on the form. Use a separate form for each policy interpretation request. If additional space is needed, please use the second page. Be sure to identify the additional discussion with the appropriate number and heading. Retain a copy of the CF 24 for your records.

- Questions from counties, including county Quality Control, must be submitted by the county CalFresh Coordinator and may be submitted
 directly to the CalFresh Policy analyst assigned responsibility for the county, with a copy directed to the appropriate CalFresh Policy unit
 manager.
- Questions from Administrative Law Judges may be submitted directly to the CalFresh Policy analyst assigned responsibility to the county
 where the hearing took place, with a copy of the form directed to the appropriate CalFresh Bureau unit manager.

1,	RESPONSE NEEDED DUE TO: Policy/Regulation Interpretation QC Fair Hearing Other:	5.	DATE OF REQUEST: 8/6/14	NEED RESPONSE BY: 8/18/14	
		6.	6. COUNTY/ORGANIZATION: Contra Costa County		
		7.	SUBJECT: SAR 7 processing		
2.	REQUESTOR NAME:	8.	REFERENCES: (Include ACL/ACIN, o NOTE: All requests must have a reg	court cases, etc. in references) gulation cite(s) and/or a reference(s).	
3.	PHONE NO.:		ACL 12-25		
4.	REGULATION CITE(S):				

9. QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):

SAR 7 is received on time but not processed until after extended filing date. When attempting to process, it is discovered that the SAR 7 is incomplete. Do we at this point send an request for Information form with the SAR 7 for the client to complete and return to make the SAR 7 complete and discontinue at the end for 09/14 for failure to provide if client does not respond. Or do we suspend 9/14 benefits and send them a 960Y.

Example

SAR 7 due in July, received on 7/8/14 but not processed until August 6th. It is incomplete and it is too late to suspend benefits for August since they have already been issued. Do we hold September benefits and send a 960Y and if client fails to provide we would discontinue for incomplete SAR or do we just request the information/SAR7 to make it complete and if client fails to comply we will discontinue at the end of September for failure to provide.

10. REQUESTOR'S PROPOSED ANSWER:

Send the 960 Y Suspend NOA informing the client of what is missing or incomplete SAR 7 with a deadline to return to avoid discontinuance. If the HH responds and still does not provide then we can send the reminder that we have received the SAR but it is still incomplete and we will discontinue at the end of the month.

Example

SAR 7 due in July received in time, not processed until August 6th, It is incomplete and too late to suspend August benefits. We would hold September' benefits. Send the 960 Y with the SAR indicating information which is incomplete and/or requesting information to make it complete. If client does not provide we send the reminder and discontinue at the end of September for incomplete SAR 7 if client fails to provide.

11. STATE POLICY RESPONSE (CFPB USE ONLY):

In regards to your policy interpretation inquiry regarding SAR 7 processing, The 960 Y cannot be sent after the extended filing date as specified in the example. Because the SAR 7 is incomplete, the household's eligibility to continue CalFresh benefits is unclear. Per MPP section 63-300.5(a)(2), "During the certification period, the CWD may obtain information about changes in a household's circumstances, other than information reported on the income report, through a third party or the household that the CWD cannot use to clearly determine eligibility and/or benefit amount. The CWD must pursue clarification using the following procedure:

- (A) The CWD must issue a Request for Information (RFI) which advises the household of the verification it must provide or actions it must take to clarify the household's circumstances.
- (B) The CWD must allow the household at least 10 days to respond or to clarify its circumstances either by telephone or by correspondence, as the CWD directs.

FOR CDSS USE					
DATE RECEIVED:	ë	DATE RESPONDED TO COUNTY/ALJ:			

CF 24 (7/12)

CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION (Continued)								
1.	RESPONSE NEEDED DUE TO:	5.	DATE OF REQUEST:	NEED RESPONSE BY:				
	☐ Policy/Regulation Interpretation							
	☐ QC ☐ Fair Hearing	6.	COUNTY/ORGANIZATION: SUBJECT:					
		7.						
	Other:	/·	SUBJECT.					
2.	REQUESTOR NAME:	8. REFERENCES: (Include ACL/ACIN, court cases, etc. in references) NOTE: All requests must have a regulation cite(s) and/or a reference						
3.	PHONE NO.:							
4.	REGULATION CITE(S):							

(C) If the household does provide sufficient information to clarify its circumstances, the CWD must issue a notice of adverse action to terminate the household after at least 10 days has been given to the household to respond.

(D) If the household responds to the RFI and provides sufficient information, the CWD must act on the new circumstances in

accordance with noticing procedures for increases or decreases in benefits."